

FORM PTO-1390 (REV 10-94)		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE	ATTORNEY'S DOCKET NUMBER
TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371		RCA 88641	
INTERNATIONAL APPLICATION NO.	INTERNATIONAL FILING DATE		PRIORITY DATE CLAIMED
PCT/US97/17036	23 September 1997 (23.09.97)		14 April 1997 (14.04.97)
TITLE OF INVENTION SYSTEM FOR ACQUIRING INFORMATION REQUESTED BY A USER VIA A PROGRAM GUIDE SELECTION			
APPLICANT(S) FOR DO/EO/US James Edwin Hailey, Michael Wayne Johnson, Hugh Boyd Morrison, Robert Joseph Logan, Robert Skipworth Comer, Sheila			
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:			
<p>1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371.</p> <p>3. <input checked="" type="checkbox"/> This express request to begin national examination procedures (35 U.S.C. 371(f)) at any time rather than delay examination until the expiration of the applicable time limit set in 35 U.S.C. 371(b) and PCT Articles 22 and 39(1).</p> <p>4. <input checked="" type="checkbox"/> A proper Demand for International Preliminary Examination was made by the 19th month from the earliest claimed priority date.</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)) a. <input type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau). b. <input checked="" type="checkbox"/> has been transmitted by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).</p> <p>6. <input type="checkbox"/> A translation of the International Application into English (35 U.S.C. 371(c)(2)).</p> <p>7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) a. <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau). b. <input type="checkbox"/> have been transmitted by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input checked="" type="checkbox"/> have not been made and will not be made.</p> <p>8. <input type="checkbox"/> A translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</p> <p>9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).</p> <p>10. <input type="checkbox"/> A translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).</p>			
Items 11. to 16. below concern document(s) or information included:			
<p>11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98. with references attached</p> <p>12. <input checked="" type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included</p> <p>13. <input checked="" type="checkbox"/> A FIRST preliminary amendment. <input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment.</p> <p>14. <input type="checkbox"/> A substitute specification.</p> <p>15. <input type="checkbox"/> A change of power of attorney and/or address letter.</p> <p>16. <input type="checkbox"/> Other items or information:</p>			
<u>CERTIFICATE OF MAILING UNDER 37 CFR 1.10</u>			
EJ 648050268US		October 5, 1999	
"Express Mail" mailing no.		Date of Deposit	
I hereby certify that this application is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.			
Davida Fornarotto		<u>Davida Fornarotto</u>	
Typed or printed name of person mailing application		Signature of person mailing application	

S APPLICANT 09/402294	INTERNATIONAL APPLICATION NO PCT/US97/17036	ATTORNEY'S DOCKET NUMBER RCA 88641																
<p>17 <input checked="" type="checkbox"/> The following fees are submitted:</p> <p>BASIC NATIONAL FEE (37 CFR 1.492(a)(1)-(5)): Search Report has been prepared by the EPO or JPO..... \$840.00</p> <p>International preliminary examination fee paid to USPTO (37 CFR 1.482) \$670.00</p> <p>No international preliminary examination fee paid to USPTO (37 CFR 1.482) but international search fee paid to USPTO (37 CFR 1.445(a)(2))..... \$760.00</p> <p>Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO..... \$970.00</p> <p>International preliminary examination fee paid to USPTO (37 CFR 1.482) and all claims satisfied provisions of PCT Article 33(2)-(4)..... \$96.00</p>		CALCULATIONS PTO USE ONLY																
ENTER APPROPRIATE BASIC FEE AMOUNT =		\$ 970.00																
<p>Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)).</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>CLAIMS</th> <th>NUMBER FILED</th> <th>NUMBER EXTRA</th> <th>RATE</th> </tr> </thead> <tbody> <tr> <td>Total claims</td> <td>18. -20 =</td> <td>0</td> <td>X 18.00</td> </tr> <tr> <td>Independent claims</td> <td>3 -3 =</td> <td>0</td> <td>X 78.00</td> </tr> <tr> <td colspan="2">MULTIPLE DEPENDENT CLAIM(S) (if applicable)</td> <td colspan="2">+260.00</td> </tr> </tbody> </table>		CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	Total claims	18. -20 =	0	X 18.00	Independent claims	3 -3 =	0	X 78.00	MULTIPLE DEPENDENT CLAIM(S) (if applicable)		+260.00		\$
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE															
Total claims	18. -20 =	0	X 18.00															
Independent claims	3 -3 =	0	X 78.00															
MULTIPLE DEPENDENT CLAIM(S) (if applicable)		+260.00																
TOTAL OF ABOVE CALCULATIONS =		\$ 970.00																
<p>Reduction by 1/2 for filing by small entity, if applicable. Verified Small Entity Statement must also be filed (Note 37 CFR 1.9, 1.27, 1.28).</p>		\$																
SUBTOTAL =		\$ 970.00																
<p>Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).</p>		\$																
TOTAL NATIONAL FEE =		\$ 970.00																
<p>Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property</p>		\$ 40.00																
TOTAL FEES ENCLOSED =		\$ 1010.00																
		Amount to be: refunded \$ charged \$ 1010.00																
<p>a. <input type="checkbox"/> A check in the amount of \$ _____ to cover the above fees is enclosed.</p> <p>b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. <u>07-0832</u> in the amount of \$ <u>1010.00</u> to cover the above fees A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>07-0832</u>. A duplicate copy of this sheet is enclosed.</p>																		
<p>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</p>																		
<p>SEND ALL CORRESPONDENCE TO Mr. Joseph S. Tripoli THOMSON MULTIMEDIA LICENSING INC. PO Box 5312 Two Independence Way Princeton, New Jersey 08543</p>		<p><i>Alexander J. Burke</i> SIGNATURE</p> <p><u>Alexander J. Burke</u> NAME</p> <p>40,425 REGISTRATION NUMBER</p> <p>RECEIVED U.S. PATENT AND TRADEMARK OFFICE 10-100</p>																

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM FOR ACQUIRING INFORMATION REQUESTED BY A USER VIA A PROGRAM

GUIDE SELECTION

the specification of which (check only one item below):

is attached hereto.

was filed as United States application

Serial No. _____

on _____,

and was amended

on _____ (if applicable).

was filed as PCT international application

Number PCT/US97/17036

on 23 September 1997,

and was amended under PCT Article ~~19~~ 34

on 24 March 1999 (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

Combined Declaration For Patent Application and Power of Attorney (Continued)
(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER
RCA 88641

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
60/043,539	14 April 1997			

PCT APPLICATIONS DESIGNATING THE U.S.		
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)
PCT/US97/17036	23 September 1997 (23.09.97)	

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Joseph S. Tripoli - Reg. No. 26,040
Eric P. Herrmann - Reg. No. 29,169
Alexander J. Burke - Reg. No. 40,425

Send Correspondence to:			
Mr. Joseph S. Tripoli - Patent Operations THOMSON multimedia Licensing Inc. PO Box 5312 Princeton, New Jersey 08540 US			Direct Telephone Calls to: (Name and telephone number)
			1-609-734-9503
201	FULL NAME OF INVENTOR	FAMILY NAME HAILEY	FIRST GIVEN NAME James
	RESIDENCE & CITIZENSHIP	CITY Indianapolis	SECOND GIVEN NAME Edwin
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7239 Creekside Lane	STATE OR FOREIGN COUNTRY Indiana
			COUNTRY OF CITIZENSHIP US
			STATE & ZIP CODE/COUNTRY Indiana 46250 US
202	FULL NAME OF INVENTOR	FAMILY NAME JOHNSON	FIRST GIVEN NAME Michael
	RESIDENCE & CITIZENSHIP	CITY Indianapolis	SECOND GIVEN NAME Wayne
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7316 Cobblestone West Drive	STATE OR FOREIGN COUNTRY Indiana
			COUNTRY OF CITIZENSHIP US
			STATE & ZIP CODE/COUNTRY Indiana 46236 US
203	FULL NAME OF INVENTOR	FAMILY NAME MORRISON	FIRST GIVEN NAME Hugh
	RESIDENCE & CITIZENSHIP	CITY Indianapolis	SECOND GIVEN NAME Boyd
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7454 Galloway Avenue	STATE OR FOREIGN COUNTRY Indiana
			COUNTRY OF CITIZENSHIP US
			STATE & ZIP CODE/COUNTRY Indiana 46250 US

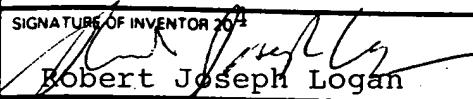
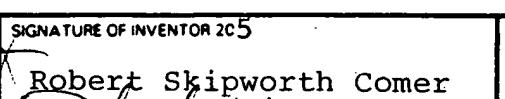
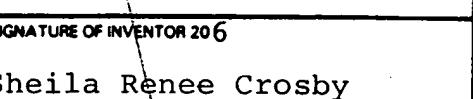
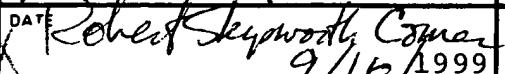
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
James Edwin Hailey	Michael Wayne Johnson	Hugh Boyd Morrison
DATE	DATE	DATE

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Continued)

204	FULL NAME OF INVENTOR	FAMILY NAME LOGAN	FIRST GIVEN NAME Robert	SECOND GIVEN NAME Joseph
	RESIDENCE & CITIZENSHIP	CITY Indianapolis	STATE OR FOREIGN COUNTRY Indiana	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7520 Prairie View Lane	CITY Indianapolis	STATE & ZIP CODE/COUNTRY Indiana 46256 US
205	FULL NAME OF INVENTOR	FAMILY NAME COMER	FIRST GIVEN NAME Robert	SECOND GIVEN NAME Skipworth
	RESIDENCE & CITIZENSHIP	CITY Carmel	STATE OR FOREIGN COUNTRY Indiana	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 14 Shady Lane	CITY Carmel	STATE & ZIP CODE/COUNTRY Indiana 46033 US
206	FULL NAME OF INVENTOR	FAMILY NAME CROSBY	FIRST GIVEN NAME Sheila	SECOND GIVEN NAME Renee
	RESIDENCE & CITIZENSHIP	CITY Crystal Lake	STATE OR FOREIGN COUNTRY Illinois	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 325 Hampton Court	CITY Crystal Lake	STATE & ZIP CODE/COUNTRY Illinois 60012 US

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
 Robert Joseph Logan	 Robert Skipworth Comer	 Sheila Renee Crosby
DATE  October 3 1999	DATE  Robert Skipworth Comer 9/16/1999	DATE  1999

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

RCA 88641

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM FOR ACQUIRING INFORMATION REQUESTED BY A USER VIA A PROGRAM**GUIDE SELECTION**

the specification of which (check only one item below):

is attached hereto.

was filed as United States application

Serial No. _____

on _____,

and was amended

on _____ (if applicable).

was filed as PCT international application

Number PCT/US97/17036on 23 September 1997,and was amended under PCT Article ~~32~~ 34on 24 March 1999 (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (If PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER
35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
0/043,539	14 April 1997			
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		
US97/17036	23 September 1997 (23.09.97)			

<p>Send Correspondence to:</p> <p>Mr. Joseph S. Tripoli - Patent Operations THOMSON multimedia Licensing Inc. PO Box 5312 Princeton, New Jersey 08540 US</p>				<p>Direct Telephone Calls to: <i>(name and telephone number)</i></p> <p>1-609-734-9503</p>
201	FULL NAME OF INVENTOR	FAMILY NAME HAILEY	FIRST GIVEN NAME James	SECOND GIVEN NAME Edwin
	RESIDENCE & CITIZENSHIP	CITY Indianapolis	STATE OR FOREIGN COUNTRY Indiana	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7239 Creekside Lane	CITY Indianapolis	STATE & ZIP CODE/COUNTRY Indiana 46250 US
202	FULL NAME OF INVENTOR	FAMILY NAME JOHNSON	FIRST GIVEN NAME Michael	SECOND GIVEN NAME Wayne
	RESIDENCE & CITIZENSHIP	CITY Indianapolis	STATE OR FOREIGN COUNTRY Indiana	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7316 Cobblestone West Drive	CITY Indianapolis	STATE & ZIP CODE/COUNTRY Indiana 46236 US
203	FULL NAME OF INVENTOR	FAMILY NAME MORRISON	FIRST GIVEN NAME Hugh	SECOND GIVEN NAME Boyd
	RESIDENCE & CITIZENSHIP	CITY Indianapolis	STATE OR FOREIGN COUNTRY Indiana	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7454 Galloway Avenue	CITY Indianapolis	STATE & ZIP CODE/COUNTRY Indiana 46250 US

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201  James Edwin Hailey	SIGNATURE OF INVENTOR 202  Michael Wayne Johnson	SIGNATURE OF INVENTOR 203  Hugh Boyd Morrison
DATE 1/1	DATE 2/1	DATE 2/1

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Continued)

204	FULL NAME OF INVENTOR	FAMILY NAME LOGAN	FIRST GIVEN NAME Robert	SECOND GIVEN NAME Joseph
	RESIDENCE & CITIZENSHIP	CITY Indianapolis	STATE OR FOREIGN COUNTRY Indiana	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 7520 Prairie View Lane	CITY Indianapolis	STATE & ZIP CODE/COUNTRY Indiana 46256 US
205	FULL NAME OF INVENTOR	FAMILY NAME COMER	FIRST GIVEN NAME Robert	SECOND GIVEN NAME Skipworth
	RESIDENCE & CITIZENSHIP	CITY Carmel	STATE OR FOREIGN COUNTRY Indiana	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 14 Shady Lane	CITY Carmel	STATE & ZIP CODE/COUNTRY Indiana 46033 US
206	FULL NAME OF INVENTOR	FAMILY NAME CROSBY	FIRST GIVEN NAME Sheila	SECOND GIVEN NAME Renee
	RESIDENCE & CITIZENSHIP	CITY Crystal Lake	STATE OR FOREIGN COUNTRY Illinois	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 325 Hampton Court	CITY Crystal Lake	STATE & ZIP CODE/COUNTRY Illinois 60012 US

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
Robert Joseph Logan	Robert Skipworth Comer	Sheila Renee Crosby
DATE 1999	DATE 1999	DATE 9/16 1999